

**Delaware Division of Corporations
401 Federal Street – Suite 4
Dover, DE 19901
Phone: 302-739-3073
Fax: 302-739-3812**

Certificate of Blanket Change of Agent

Dear Sir or Madam:

Enclosed please find a form for a Certificate of Blanket Change of Address of Registered Office and Change of Name of Registered Agent, to be filed in accordance with the General Corporation Law of the State of Delaware. The fee for filing the certificate is \$149.00. If your document is more than 1 page, please add \$9.00 for each additional page. Please make your check payable to the “Delaware Secretary of State”.

For the convenience of processing your order in a timely manner, please include a cover letter with your name, address and telephone/fax number to enable us to contact you if necessary. Please make sure you thoroughly complete all information requested on this form. It is important that the execution be legible, we request that you print or type your name under the signature line.

Thank you for choosing Delaware as your corporate home. Should you require further assistance in this or any other matter, please don't hesitate to call us at (302) 739-3073.

Sincerely,

Department of State
Division of Corporations

encl.
rev. 06/06

STATE OF DELAWARE
CERTIFICATE OF CHANGE OF ADDRESS OF
REGISTERED OFFICE AND CHANGE OF NAME
OF REGISTERED AGENT
PURSUANT TO SECTION 134(a & b) OF TITLE 8 OF THE
DELAWARE CODE

Pursuant to the provisions of Section 134(a & b) of Title 8 of the Delaware Code, the undersigned agent for service of process, in order to change the address of the registered office and the name of the registered agent of the corporations for which it is registered agent, hereby certifies that:

1. The current name of the agent is: _____

2. The new name of the agent is:

3. The address of the old registered office was: _____
_____ in the county of _____.

4. The address to which the registered office is to be changed is:

5. The new name and address will be effective on:_____.

IN WITNESS WHEREOF, the undersigned agent has caused this certificate to be signed on this _____ day of _____, A.D._____.

By:_____
Registered Agent/Authorized Officer/Person

Name:_____
Print or Type-Name & Title